

C3P ANNUAL RE-CERTIFICATION FORM

[Please complete (print or type) the following questionnaire]

NAME of Recipient: As you wish your name to appear in the C3P Guide. *If your name has changed please include prior listing.*

ADDRESS (Where you want certificate mailed): **CITY** **STATE** **ZIP**

Company Name (must be included): As you wish your company name to appear in the C3P Guide.

Telephone Number:

Fax Number:

<input type="text"/>	<input type="text"/>
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Email address:

If you wish to receive seminar info and updates via email. This address will not be shared with anyone outside Spectrum. Please write neatly.

Which designation level should you be: (For Example: C4P, C8P....etc...)

Credit Card Number:

Expiration Date:

V-Code:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Continuing Education:

List below all Real Estate seminars (total of at least 3 hours) attended. List location, name of course, sponsor, number of hours and attach proof of attendance if not a SPECTRUM session, or date and location of SPECTRUM class. For SPECTRUM Co-Sponsored events please submit documentation from the sponsoring agency or association.

Return to: **SPECTRUM SEMINARS, INC.**
 545 Shore Road
 Cape Elizabeth, ME 04107

Please include a check for \$50 (Re-cert. fee) and return. No fee with
Spectrum class as continuing ed. Questions? Call 207-767-8000 x201. Email:
admin@spectrumseminars.com